

Application Data Sheet**Application Information**

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R? No
Sequence submission?:: No
Computer Readable Form
(CRF)::
Number of copies of CRF::
Title:: Wheat Variety 26R15
Attorney Docket Number:: 1656
Request for Early Publication?:: Yes
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 0
Small Entity:: 0
Petition included?:: No
Secrecy Order in Parent Appl.?:: No

DOCKETED
MAR 11 2004

Applicant Information:

Applicant Authority type:: Inventor
Primary Citizenship Country:: US
Status:: Full capacity
Given Name:: Robert
Middle Name:: Lewis
Family Name:: Clarkson
City of Residence:: Tipton
State or Province of Residence:: IN
Country of Residence:: US

Street of mailing address:: 106 Plumlee
City of mailing address:: Tipton
State or Province of mailing address:: IN
Postal or Zip Code of mailing address:: 46072

Applicant Information:

Applicant Authority type:: Inventor
Primary Citizenship Country:: US
Status:: Full capacity
Given Name:: Kyle
Middle Name:: Jay
Family Name:: Lively
City of Residence:: Tipton
State or Province of Residence:: IN
Country of Residence:: US
Street of mailing address:: 2894 E 400 S
City of mailing address:: Tipton
State or Province of mailing address:: IN
Postal or Zip Code of mailing address:: 46072

Applicant Information:

Applicant Authority type:: Inventor
Primary Citizenship Country:: US
Status:: Full capacity
Given Name:: William
Middle Name:: Joseph
Family Name:: Laskar
City of Residence:: Tipton
State or Province of Residence:: IN
Country of Residence:: US

Street of mailing address:: 4081 S 125 W
City of mailing address:: Tipton
State or Province of mailing address:: IN
Postal or Zip Code of mailing address:: 46072

Applicant Information:

Applicant Authority type:: Inventor
Primary Citizenship Country:: US
Status:: Full capacity
Given Name:: Gregory
Middle Name:: Charles
Family Name:: Marshall
City of Residence:: Arcadia
State or Province of Residence:: IN
Country of Residence:: US
Street of mailing address:: 81 Point Lane
City of mailing address:: Arcadia
State or Province of mailing address:: IN
Postal or Zip Code of mailing address:: 46030

Correspondence Information

Correspondence Customer Number:: 27310

Representative Information

Representative Customer Number:: 27310

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::